

Nurses' Perceptions of the Concept of Power in Nursing: A Qualitative Research

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ABSTRACT

Introduction: Power is a complex and extensive concept in nursing, which has a decisive impact on the accomplishment of duties, satisfaction and achievement of professional goals. Explaining the concept of power in nursing from the perspective of nurses and accessing its various dimensions may result in a better understanding of this issue.

Aim: This study was aimed to explore the concept of power in nursing, using the views and experiences of Iranian nurses.

Materials and Methods: This study was a qualitative research which used a content analysis approach. Participants were selected from among nurses active in clinical, management, and educational practices using the purposive sampling method. Data were collected using a semi-structured individual interview. The results were obtained by analysing the data using an inductive approach and the constant comparison method.

Results: The participants of this study regarded the power of nursing as a positive concept and the issue of power in nursing consisted of three classes, the genesis with the subclasses of "being purposeful", "being under the shadow of the profession nature", "being dependent on the source", strengthening with the subclasses of "being emotional and introverted", "being formed in the context of professional communication", "fluidity and flowing", and the evolution with the subclasses "based on human values", and "being a tool for professional excellence".

Conclusion: The concept of power in nursing can be considered a purposeful issue based on the nurses' viewpoint which flourishes in the context of human, moral and caring nature of the nursing profession. According to its dependence on the nature of profession and on the basis of professional communication, Power of nursing grows with a fluidlike flowing structure, linked with human values, reaches maturity and results in outcomes such as improving the quality of care and professional excellence.

Keywords: Health occupations, Professional communication, Professional autonomy, Quality of health care

INTRODUCTION

Power is a concept, widely used in physical and social sciences and therefore, there are several definitions for it [1]. Power can be defined as something enabling a person or a group to achieve goals. Thus, power gives individuals or groups the potential for changing attitudes and the behaviours of others [2]. Power in nursing is also an important and controversial concept which involves various interpretations [3]. Today, a nurse should be a strategic planner, a human resources expert, a risk manager, a high quality expert and able to understand the complexities of clinical areas [4]. Hence, the power helps nurses to seized opportunities to apply their skills and knowledge creatively [5]. On the other hand, a powerful nurse can also increase power between patients and clients [6,7], which has a positive impact on patients' sense of empowerment and health outcomes will be better [7]. The fact that what nursing power is; how it is obtained and how it becomes evident is an abstract concept for many nurses. This confusion around the concept of power is due to the multitude of definitions of power. Power simply means the ability to do or act, but, there are some other definitions in literature, e.g., the ability to act, to influence, having control or autonomy [8,9], the ability to use resources to achieve desirable goals or outcomes [10]. Conceptualized power as the application of knowledge to implement autonomy or effectiveness [11].

By reviewing nursing literature, a clear, obvious, single perception of the concept of power in nursing cannot be achieved. The definitions in this area are very limited. Manojlovich has expressed that power in nursing includes caring practices performed by nurses which are used to empower patients [1]. AS Bradbury-Jones et al., pointed out, since many nurses do not have a sense of control over their

work environment, defines power as the ability of control over the work environment [12]. Due to the diversity of definitions, studying the essence of power should be based on a bottom-up analytical design. The concept of power consists of a multi-layered network of social relationships which requires being aware of humans' basic interests and attitudes [6]. So, not a common quantitative research, but qualitative studies are of great help in clarifying the concept.

The review of the existing literature indicates that there are not many studies, both globally and in the context of Iran, that are based on the concept of power in nursing, using the knowledge, experiences, attitudes and interests of nurses in conducting deep human research. Therefore, the lack of knowledge and information in the field is easily noticeable. If in seeking for power, we are looking to discover ways to achieve power in nursing, we must first reach the perception of what power means to nurses which will be granted through a qualitative study that examines the issue more deeply. Therefore, this study was carried out with the purpose of explaining the concept of power in nursing using the views and experiences of Iranian nurses.

MATERIALS AND METHODS

This study was part of a larger study titled 'explaining the concept of power and the process of gaining power in the nature of nursing profession' carried out qualitatively, using conventional content analysis, in 14 months. Qualitative approach studies human phenomena rooted in the context of social sciences. This research method can be effective in clarifying ambiguous and unknown areas and is the best way to describe life experiences and essential social processes in them which focuses on the "whole" perception and

comprehension. Therefore, this research adopts the philosophy of "holistic view" of nursing [13]. Qualitative content analysis is a technique that is widely used to interpret the meaning of the content of the text data.

Participants

In this study, those nurses were selected who had at least 5 years of work experience in clinical, management and educational practices and were able to provide their information and experience on the subject of the study. The sampling method was purposive in nature which became theoretical at later stages. Fifteen participants with various positions such as head nurses, matrons, clinical supervisors, faculty members, board members of the Nursing Organization of Iran were selected in this study. The participants included 9 females and 6 males aged between 38 and 45 years with work experiences between 13 and 22 years. None of the participants refused to participate.

Setting

The setting included the working environment of each of the participants in the study. Therefore, hospitals (educational, state, private sector), universities of Medical Sciences, and the Nursing Organization formed the setting of the research.

Data collection

Considering the general question of the study, i.e., what power means in the nursing profession, the data were collected using in-depth semi-structured open-question interviews by one of the authors. Interviews were conducted under the guidance of experts and supervisors. Errors in the first and second interviews were fixed and subsequent interviews became more meticulous.

The time of the interview sessions varied between 60 and 90 minutes. During the interview, participants were questioned about their experiences, attitudes and views toward the concept of nursing power in their professional activities. All of the interviews were recorded in audio. The interview started in a private setting, with more general questions and gradually became more specific toward the objectives of the research. However, the questions were raised on the basis of a preliminary questionnaire framework, made by researchers; the interview process had some flexibility, based on the participants' responses, relative to the basic framework.

Questions such as the following were raised:

- How would you define nursing power?
- Do you consider yourself a powerful nurse? Why?
- Please express some of your experience regarding the feeling of power/inability in performing your professional activities.

Conducting each interview was leading the researchers in conducting the subsequent interviews and new questions. To ensure a correct understanding of concepts, interviews were transcribed and returned to participants, so the researcher and participants could achieve a common understanding of concepts and issues (as known member check).

Data analysis

The data were analysed using an inductive approach and the constant comparison method. By transcribing each interview in Word, Microsoft Office software version 2007, it was observed several times by the researchers that a general understanding of the interview could be achieved. The coding process of each test was performed using the in vivo and inferential approach. For example, some first level codes were obtained from the following quote:

I think if someone wants to act powerful, his knowledge and awareness must be more than all others, should be serious and decisive. Also should have a good relationship, a good temperament and cordial relations with all units

So codes were extracted as follows:

"Strong action", "having knowledge and awareness", "being serious and decisive", "good communication", "moral involvement", "relationship based on sincerity".

All the codes extracted from each text were stored in separate tables. By performing the constant comparison, the codes were all classified and integrated and thus, the primary classes were extracted. With the integration of primary classes, main classes were extracted (selective coding).

Trustworthiness

The Guba and Lincoln criteria were used for measuring the accuracy and reliability of the study [14]. The researchers analysed the data independently and in constant comparison with extracted categories. To evaluate the credibility; the long-term involvement strategy and the participants' review were used. The results and summary of the interviews were returned to the participants for reconfirmation which revealed that the researchers have reflected the exact participants' views. Allocation of sufficient time for data collection, use of experts' views in the process of data analysis and the agreement with participants on the resulting themes were among the other measures to ensure the accuracy of the data.

Ethical Considerations

All the participants received sufficient information about the purpose of participating in the study and had absolute discretion to participate in the study or to refuse to cooperate with the researchers at any time. Their bio-data and identity, as well as the information obtained from the interview transcripts, remained confidential and the participants were all informed of the way the results of the study were to be published.

RESULTS

Based on the analysis of the data, the following results were obtained regarding the concept of power in nursing, consisting of three main categories: the genesis with the subclasses of being purposeful, being under the shadow of the profession nature, being dependent on the source, strengthening with the emotional subclasses and being introverted, being formed in the context of professional communication, fluidity and flowing, and the evolution with the subclasses based on human values, and being a tool for professional excellence.

1 : Genesis

From the perspective of the participants in this study, the concept of power in nursing is formed purposefully. However, such genesis is under the shadow of the nursing profession and is affected by it and can only come to fruition if different sources of power are supplied. This class includes three subclasses as follows.

1-1: Being purposeful

Power from the perspective of the nurses participating in this study is a purposeful concept. Power in nursing on the one hand, leads to the promotion of processes, the achievement of status and privileges for the profession and ultimately, the development of the profession, attempts to obtain outcomes such as increased satisfaction of clients and personnel, reduced incidence of complications in patients, reduced length of hospital stay, and improved the quality of services provided to patients. However, the ultimate goals are considered to be improving the quality of patient care and developing the profession. In this regard, one of the participants stated:

Our ultimate goal is to promote this career... (Participant No: 02)

Another participant said:

We seek power only to offer a better work, we don't intend to prove we are superior or someone else in the field is superior ... (Participant No: 04)

1-2: Being under the shadow of the profession nature

The feminine nature of nursing plays a structural role in the formation of the power concept in nursing. Based on feminine nature, nursing is known as an obedient and humble profession. This is especially more prominent in the Iranian culture where women make no considerable attempt to realize their rights and gain independence in various fields:

Perhaps as the majorities (nurses) are women, they do not want to be involved in the matters. Maybe they have their own problems out of the workplace. They are not like men who, for instance, struggle to get what they deserve according to the society's culture.... (Participant No: 04)

In addition to these matters, service providing, enforcement of medical obligations, the ethical nature of the profession, job difficulty and tolerance are among the underlying characteristics of the nursing profession, which are considered as obstacles for nurses in seeking power:

The nature of our job does not make us powerful in our profession, it is more like we do what others say, perhaps the nature of our job makes us do that, maybe it is a service job and its nature makes us perform a series of orders...(Participant No: 06)

1-3: Being dependent on the source

The findings of this study indicate that on the whole, nursing possession of power, on the whole, is depended on having some other sources. If such sources are available, nursing power is enhanced and begins flowing like a current river which links from an individual power source into the sea of professional power. The sources of such power can be in the form of having decision-making power, punishing and rewarding power, recognizing power, word power, scientific power, skill power, communicative power, participation power, implementation power, and financial power:

The truth is that power is absolutely meaningless without money, I cannot define power without financial resources; power does not really make any sense without financial resources... (Participant No: 02)

In the meantime, the absolute emphasis of the participants of the study is that having up to date knowledge, skills and experience is the foundation stone of power in nursing:

Our several years of experience in clinical and educational environments show that those who are scientifically powerful usually have superior positions in the system in terms of power as compared with the rest of the nurses... (Participant No: 15)

At the same time, power in nursing can be divided into two individual and professional forms. Part of individual power is synonymous with having some psychological features and resources. Decisiveness, self-esteem, self-control, courage, ability to express opinions and ability to make decisions are among such features:

Maybe all these conditions are provided in an environment, but one cannot demonstrate their power. This might be because their personality and typology might not be like that... (Participant No: 08)

These features, along with academic, skill and experience capabilities, make it possible for a person to be able to "influence" others and make use of such influence to achieve their organization goals:

(Power) means how capable and influential you can be in offering your work in whatever position or responsibility you have... (Participant No: 11)

However, another part of the individual power which has a greater manifestation in an organization is what is interpreted as "to rule the hearts":

I believe power is ruling through entering the heart (Participant No: 04)

In other words, real individual power is something through which, one can take the path towards the goal without the need to apply the rules, threats, intimidation, encouragement or punishment, and pressure and domination, and in this path, personnel and subordinates pave the way through having a complete satisfaction of cooperating with superiors. In this form of power, a link is established which does not make any use of financial rewards and exertion of force:

A nurse aid once said, "wow, are you the supervisor today?" I guess tonight will be like hell. I said "don't say that, did I ever bother you?" the nurse aide replied "of course not, it is actually your good manners that make us work wholeheartedly until nothing is left that makes you deal with them and make us feel ashamed...(Participant No: 03)

From an organizational perspective, nursing professional power source is the acceptance of the fundamental role of the profession and professional individuals by the health care system and the presence of the stabilized nursing position in the health system. In this state, the power of the nursing profession is in highlighting the roles nurses are scientifically and legally able to play at different levels. The concept of professional power is only formed and goes toward perfection in the presence of concepts such as professional independence, solid profession status, professional growth, ability to lead the system and progressing organizational goals, and the positive use of individuals' opportunities and potential:

How much does the hospital administration office, or the hospital's director, or manager count on me? How much do the physicians I am working with count on me...in the field of nursing, the power should not be limited to the bureaucracy and administrative programs. (Participant No: 07)

2 :Strengthening

After the formation of the concept of power in nursing, it needs to be strengthened and stabilized both internally and externally. The true power is an inner feeling that not only strengthens the outer manifestation of power but also enhances individual motivation in professional performance. Since the nursing profession is defined by the connection to colleagues and other members of the treatment and the care team, power in nursing can be amplified or suppressed in the context of such communication. Three subcategories of being emotional and introverted; strengthening in the context of professional communication, flowing and fluidity fall into this category.

2-1: Being emotional and introverted

The findings indicate that power can be regarded as a "feeling" which has a direct impact on the increased motivation and work spirit and its absence will eventually affect the type and quality of services provided to patients. This inner feeling establishes a direct, two-way communication with a sense of accomplishment and being useful to the extent where they are defined as synonymous with the sense of being powerful:

I think you feel powerful when...I mean power is the sense of achievement or to feel useful... (Participant No: 04)

Such inner feeling helps in reducing paradoxical feelings toward the nursing profession among personnel. Some nurses are stuck in a limbo of commitment to their job and leaving it:

So far, I pridefully told everyone that I am a nurse and I am proud of my job... I NEVER let my children choose this as a major (with a very slow and desperate tone) (Participant No: 06)

The feeling of power is strongly transferable to subordinates, and if applied correctly, the results in the development and promotion of the whole system can increase staff commitment.

Even if I am a nurse in the department where I believe in my matron, to be a powerful person, it seems like I have such power myself, the more powerful he is, the greater power I feel...(Participant No: 02)

2-2: Strengthening in the context of the professional communication

As we have seen from the results of the study, professional communication in any form and level undeniably influences the concept of power in nursing. Among the factors strengthening the sense of individual and professional power are direct contact with organizational power sources, professional and interdisciplinary relationship with maintaining dignity and respect, lack of conflicting viewpoints, and working with and not against each other to name a few. The treatment and care team believes the work of the treatment to be a group and team work which holds the concept of power on sturdy pillars of trust and confidence in each other. In this case, the power not only lacked a negative and suppressive sense but is also used as a means to achieve common goals in the health and treatment of patients.

This belief is to some extent more highlighted among the nursing staff as compared to other disciplines:

Our major (nursing) makes us all connected to each other, no one does anything separately. It is teamwork; we should really be together and back each other up. That's how we can keep on working more easily... (Participant No: 03)

Power from the perspective of nurses in this study is not just regarded as coercion and domination. A superior power is considered constructive and leading and results in a greater motivation towards working and increased cooperation among personnel when it is capable of showing sympathy alongside its determination and decisiveness. In this regard, one of the participants said:

When one of the personnel is crying and says I'm having trouble with my husband for some reason, it would be wiser for a matron to understand that employee, at least, for a limited period of time. This is management, this is decisiveness; that he uses his own authority...If personnel' issues are understood, they work with greater motivation... (Participant No: 01)

2-3: Flowing and fluidity

Based on the results of this study, the concept of nursing power has a pyramid structure, which can be compared with the structure of a military system, in which, power levels and consequently, authorities are different. However, that does not mean that power cannot be transferred and delegated. Delegating authority improves processes, procedures, practices and creates satisfaction in the system. Power flows like a river, the stillness of it will cause corruption and destruction. Delegating authority to subsets of a health system such as a nursing system is based on the knowledge, experience and abilities of individuals, which can improve the overall system performance:

Power is just flowing, meaning that it is not something measurable, it is flowing, you transfer power to the next, it is just circling around the system and overall, its outer symbol makes something powerful... (Participant No: 02)

Delegating power and authority can promote the authorities of the counterparty. One with more authorities could work with greater freedom, with a greater demonstration of power... (Participant No: 12)

The monopoly of power, both at the macro level, comprising the entire health care system, and the micro level, such as a hospital nursing system, inhibits professional growth and development, oppresses creativity and leads to discontent caused by injustice:

When power is particularly in one's hands, injustice naturally happens to the nurses...their creativity goes away over time... (Participant No: 08)

3 : Evolution

The findings suggest that power in the nursing profession after being developed and strengthened will move towards perfection.

The evolution of the concept of power in nursing will be meaningful through its linking with human values and the development of the profession. Therefore, the two subclasses based on human values and being a tool for professional excellence is classified in this category.

3-1: Based on human values

The participants in this study bind the concept of a nurse's power with the concepts of human values. Confidentiality, reliability, and trust, empathy, humility and morality are considered the rings forming the chain of communication:

The personnel, the nurse, the head of that section or the shift should trust each other to be sure they can do the right thing. This is what power is all about... (Participant No: 05)

From the perspective of the participants, performance and behaviour based on good ethics, good temper, maintaining dignity, and respect and dignity of persons at the time of exercising power (at any level) lead to the success of a personnel/manager in the advancement of the work. In contrast, applying pressure, disrespecting and insulting others, such as a subaltern personnel's pointlessness in creating distance between boss and subordinate staffs, and the deliberate negligence of staffs. Observing ethics in business transactions and professional communications has been considered an important factor in the successful exercise of power. Beyond this, power is defined as a concept whereby, a person who is a holder of positive moral characteristics is considered a powerful person:

I think power means, when one firstly, is capable of controlling oneself. It means that one, who has the moral individualities, is a powerful person. One must be powerful enough to be able to control oneself in a time of stress, psychological pressures, and in the events we observe during everyday shifts at the nursing department. Consequently, self-mastery seems to me as the highest power... (Participant No: 04)

3-2: A tool for professional excellence

The findings of this study, shows that when power is intended as a means to the excellence, so that it can be called transcendent power, consequences such as an increase in quality of care, inner satisfaction, client satisfaction, subordinates' satisfaction and clients' interest can be expected as a product:

When we sense greater power, we can both gain what we deserve and give better services with greater quality, we perform things better.... (Participant No: 03)

This is a two-way relationship i.e, the above concepts are the result of the presence of power in nursing. Moreover, achieving client's satisfaction and interests is a factor of creating and promoting a sense of inner power in a nurse:

You do feel greater power whenever a client is more satisfied with your job, you feel you could efficiently perform the work 50 personnel responsible for, which also causes your power to get promoted to the same extent (Participant No: 01)

In the opposite direction, the concept of destructive power is an umbrella that covers such concepts as monopolization, self-interest, domination, coercion, and individualism. Such concepts can be called the power pests:

A nursing director has, for example, 7 supervisors and two of them are very powerful. He gradually puts them away from the position of supervisor and sends them out of the office. He tries to eliminate them or even, in the opposite, he won't give any positions to skilled personnel as he is afraid one day they take his place... (Participant No: 02)

Destructive power replaces the job commitment with fear. Employees commit themselves to obey the rules and procedures which are sometimes based on personal attitudes, to perform routine activities without motivation and to make an effort in order to hide individual weaknesses and errors. The implementation of this kind of power

exercised by nursing managers, in conclusion, is ultimately doomed to failure.

She wanted to talk about her head nurse, but she was afraid; I asked her why she was afraid, even though, as a manager, I assured her not to be afraid, that it is okay and there is no problem. And I further assured her that I will not allow anyone oppress or take what is rightfully hers. She replied, "No! I do not want anyone to find out I spoke to you, as something may happen in the future that will lead to my loss. (Participant No:02)

DISCUSSION

In response to the main research question with regard to the concept of power in the nursing profession, it can be considered as an inner feeling, which is targeted, has a fluid structure based on feminine nature of nursing profession and professional communication can strengthen it. Since it is based on human values, it can be helpful for professional excellence. In this study, different dimensions obtained from the concept of power indicate its complexity. This complexity is also mentioned in the literature and the power in nursing has been regarded as an extensive and complex concept which is not absolute and other concepts should be used to explain it.

The word "power" is derived from the Latin verb "potere". Thus, power can be described as what makes a person or group achieve its goals [2]. In this study, it was observed that purposefulness is one of the key and fundamental dimensions of power in nursing and all participants mentioned its purpose in defining the power of nursing. The first phase of the searching power in nursing begins with determining and explaining its purpose. The findings correspond with the findings of Katriina et al., in his study, almost all 289 respondents stated that in the field of nursing, the only way to achieve the successful results is by providing a clear definition of the objectives and outcomes [15]. Based on this study, the two fundamental purposes of gaining power in nursing were "to enhance the quality of care" and "professional promotion".

"The nursing power is under the shadow of the nature of profession", means that, features of this profession have an impact on the concept of power in nursing. This issue is one of the most important factors affecting the concept of power in nursing. The nursing profession over time has been attributed to be a job for females [2]. This point which can be seen in the findings of this study causes concern. However, the predominance of women in the profession has brought about some benefits and is more closely associated with the human aspects, compassion and empathy of the professions' nature. However, according to some nursing pioneers, this profession will not gain higher power and position as long as it is dominated by females [2]. Perhaps, this is a fact that should be accepted by members of the profession, as other studies are implicitly confirming it. The findings of the study conducted by Zelek shows that the primary difference between the powers of doctors and nurses may be due to gender rather than their hierarchical positions [16].

The results of this study, suggest that the notion of power in nursing is dependent upon the source. From an individual perspective, the source of power in nurses is primarily their wisdom and ability. Updating their professional theoretical knowledge and their ability in the practical application of knowledge, recognition, judgment, decision-making and communicating makes his influence on others. This finding is in full compliance with the results of the study conducted by Ponte et al., in his study, the increase of power in nursing is proportional to the increase of nurses' educational level [17]. However, in this study, participants have expressed different ideas about the role of educational attainment on nurses' power and emphasized on the greater level of specialized knowledge but not on the level of education or college degree. In this regard, Patricia states that although, training nurses is important in their power, the more salient point is that nurses are able to gain positions which creatively apply to their knowledge and skills [18].

The study brought to light that power is an inner sense. A particular aspect in this study is the emergence of a sense of power individually and its connection with the group power in nursing.

The use of power depends on the formation of a sense of power in nurses; as it is noted in other contexts, the sense of power in a person, more than the actual amount of power, is the determinant of behaviour. Subjective sense of power is the stimulating mental effects of real power [17,19]. Although this sense is initially internal and individual, its ability to transfer to subordinates, can link the individual power to group power. In this regard, Anderson integrates the sense of individual power with social context and suggests that individuals who believe that they can find their own way in a group, can influence the attitudes and beliefs of other followers of the group. Individual sense of power is not only affected by factors of social structure (such as social status or position) but also, is linked with personality variables such as dominance [20].

Strengthening on the ground of the professional communication on the one hand and giving personal and professional divisions for nurses' power on the other hand, implies that the role played by independent performance creates the concept of power in nursing. According to the findings, from the professional perspective, a nurse's power is what enables him to independently control the affairs of his career and have a foothold and clear position in joint processes with other team members, decision-making, and health policy making in order to improve the quality of health services provided for patients. Since at least 50% of health care responsibilities is of nurses (and even in some countries, 80% of health care is done by nurses), nurses can potentially play a role in changing the health care system and policy-making, planning and implementation of the health care services. In reality, however, various national and international reports, reveals that the nurses' role in making important decisions of work environment is low [21].

In this study, all participants argued about the nurses' important role in health care and teamwork. They regarded the nurses' power as an "introduction" and "visibility" of this importance. Real cooperation, as El-Sayed expressed, requires mutual respect, open, honest, and fair communication as well as sharing decision-making power [22].

This study shows that the current structure of power in nursing is a hierarchical structure with different levels of power. Although, if the hierarchical structure is maintained, it is acceptable, what leads to greater efficiency of this structure is delegating authority to subordinates based on the ability to use the power which is in the form of fluid flow. This aspect of power is closely related to the concept of Shared Governance (SG), which is pointed out by Kramer et al., quoting HESS (1995). Shared governance is a system which makes Control of Nursing Practice (CONP) possible and promotes it. This structure is an innovation in nursing management which is designed to eliminate the traditional hierarchical model and emphasizes on command and control and thus enables nurses to practice control over health care environment [23].

This finding of the study which considers the concept of power in nursing based on human values and culture somehow disagrees with the common view which regards power as force, violence, despotism and colonialism [15,22].

Participants of this study considered the concept of power positively because this concept is linked with some aspects of human values within its superior and perfectionist meaning. A real powerful person is someone who is able to govern the hearts, having moral individualities and applying the principles of personal and professional respect and protecting human dignity in order to successfully influence others to change attitudes and behaviour. This part of the findings of the study was observed in none of the previous studies in the field of professional and organizational power and is unique by itself. The reason for this can be found in the field of study and Iran's national religious and cultural contexts. Respecting

human dignity, in addition to a professional ethic, is emphasized by Islam.

The instrumental theme for professional excellence in the findings of this study suggests that the consequences of applied power, may be affected by "how this power be used". Chiok Foong Loke also mentioned that manager's behaviour and characteristics affect the job satisfaction, organizational commitment, and personnel productivity. He further pointed encouraging the heart as one of the managers' practices and behaviour and considers offering incentives such as horizontal and vertical promotion and scholarships as the manager's effectiveness factor [24]; however, in the present study, the role of "encouraging the heart" in the use of power and positive influence on employees' professional commitment is more highlighted than the role of material encouragement.

As it was mentioned earlier, this form of power use will lead to professional excellence. Professional excellence forms the identity of the profession and includes not only growth and technical development within a profession but also the development of other aspects such as social communication, interpersonal relations, management, ethics and other areas [25].

LIMITATION

The findings are obtained from the data collected from the participants in one of Iran's cities. Since the dominant attitude of the health care system can vary in different cities, findings may have been somewhat affected by these differences.

CONCLUSION

In an effort to clarify the concept of power from the perspective of nurses, the findings of this study verify the complexity of this concept. Relying on these findings, the concept of power in nursing is a purposeful concept which flourishes in the context of the human, moral, and caring nature of the nursing profession and according to its need. It is irrigated by professional communication, grows by a fluid and ongoing structure, links to human values and matures and prepares fruits such as improved quality of care and professional excellence.

Conducting further in-depth studies in national and international level and comparing the obtained results is proposed to have more precise explanation of the "power in nursing" concept.

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